

# APPLICATION DATA SHEET

Docket No. CHL-T107C3Z1

## Application Information

|                                  |  |
|----------------------------------|--|
| Application Type::               | Regular (National Stage)   |
| Subject Matter::                 | Utility  |
| Suggested Classification::       | None   |
| Suggested Group Art Unit::       | None   |
| CD-ROM or CD-R?::                | None   |
| Number of CD disks::             | None   |
| Number of copies of CDs::        | None   |
| Sequence submission?::           | None   |
| Computer Readable Form?::        | No   |
| Number of Copies of CRF::        | None   |
| Title::                          | EXPRESSION OF ANTIGENS IN CHLOROPLASTS FOR PRODUCTION OF IMPROVED VACCINES |
| Attorney Docket Number::         | CHL-T107C3Z1   |
| Request for Early Publication::  | No   |
| Request for Non-Publication::    | No   |
| Suggested Drawing Figure::       | None   |
| Total Drawing Sheets::           | 22   |
| Small Entity?::                  | No   |
| Petition included?::             | No   |
| Petition Type::                  | N/A  |
| Secrecy Order in Parent Appl.?:: | No   |

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## Applicant Information

|   |                              |
|---|------------------------------|
| Applicant Authority Type::              | Inventor                     |
| Primary Citizenship Country::           | US                           |
| Status::                                | Unknown                      |
| Inventor One Given Name::               | <sup>100</sup> <u>Henry</u>  |
| Family Name::                           | <u>Daniell</u>               |
| City of Residence::                     | <u>Winter Park</u> <u>FL</u> |
| State or Province of Residence::        | FL                           |
| Country of Residence::                  | US                           |
| Street of Mailing Address::             | 1440 Pelican Bay Trail       |
| City of Mailing Address::               | Winter Park                  |
| State or Province of mailing address::  | FL                           |
| Country of Mailing Address::            | US                           |
| Postal or Zip Code of Mailing Address:: | 32792                        |

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## Representative Information

Representative Customer Number:: 000023557

|                              |                       |                       |
|------------------------------|-----------------------|-----------------------|
| Representative Designation:: | Registration Number:: | Representative Name:: |
| Primary                      | 35,589                | Jeff Lloyd            |

## Correspondence Information

|   |  |
|---|--|
| Name Line One::                         | Jeff Lloyd   |
| Name Line Two::                         | Saliwanchik, Lloyd & Saliwanchik, A Professional Association |
| Street of Mailing Address::             | 2421 N.W. 41 <sup>st</sup> Street, Suite A-1                 |
| City of Mailing Address::               | Gainesville  |
| State or Province of Mailing Address::  | FL   |
| Postal or Zip Code of Mailing Address:: | 32606  |
| Telephone Number One::                  | (352) 375-8100   |
| Telephone Number Two::                  |  |
| Fax Number::                            | (352) 372-5800   |
| Electronic Mail Address::               | jl@slspatents.com  |

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### Domestic Priority Information

|   |                   |                      |                      |
|---|-------------------|----------------------|----------------------|
| Application::   | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application is a<br>which claims the<br>benefit of | National Stage of | PCT/US02/41503       | December 26, 2002    |
|   | U.S. Provisional  | 60/344,704           | December 26, 2001;   |
|   | U.S. Provisional  | 60/393,428           | July 3, 2002;        |
|   | U.S. Provisional  | 60/393,651           | July 3, 2002; and    |
|   | U.S. Provisional  | 60/400, 816          | August 2, 2002.      |

### Foreign Priority Information

|           |                      |               |                    |
|-----------|----------------------|---------------|--------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|

### Assignee Information

|   |                                |
|---|--------------------------------|
| Assignee Name::                         | University of Central Florida  |
| Street of Mailing Address::             | 4000 Central Florida Boulevard |
| City of Mailing Address::               | Orlando                        |
| Country of Mailing Address::            | US                             |
| Postal or Zip Code of Mailing Address:: | 32816-0150                     |